

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		32	5/10
FORMALITY REVIEW	ke	10 (9)	06-13-01
RESPONSE FORMALITY REVIEW	m	905	9/24/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral) ... Canceled      A ..... Appeal  
÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/10/01
2	✓	✓	5/10/01
3	✓	✓	5/10/01
4	✓	✓	5/10/01
5	✓	✓	5/10/01
6	✓	✓	5/10/01
7	✓	✓	5/10/01
8	✓	✓	5/10/01
9	✓	✓	5/10/01
10	✓	✓	5/10/01
11	✓	✓	5/10/01
12	✓	✓	5/10/01
13	✓	✓	5/10/01
14	✓	✓	5/10/01
15	✓	✓	5/10/01
16	✓	✓	5/10/01
17	✓	✓	5/10/01
18	✓	✓	5/10/01
19	✓	✓	5/10/01
20	✓	✓	5/10/01
21	✓	✓	5/10/01
22	✓	✓	5/10/01
23	✓	✓	5/10/01
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28	✓	✓	5/10/01
29	✓	✓	5/10/01
30	✓	✓	5/10/01
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44	✓	✓	5/10/01
45	✓	✓	5/10/01
46	✓	✓	5/10/01
47	✓	✓	5/10/01
48	✓	✓	5/10/01
49	✓	✓	5/10/01
50	✓	✓	5/10/01

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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Sec 101  
6/24/01